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7590

09/27/2004

VENABLE, BAETJER, HOWARD & CIVILETTI, LLP

1201 NEW YORK AVE, N.W.

SUITE 1000

WASHINGTON, DC 20005

12/28/2004 CNGUYEN1 00000162 220261

09881012

01 FC:1501 1400.00 DA
 02 FC:1504 300.00 DA

DEC 27 2004

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(Depositor's name)

(Signature)

(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/881,012	06/13/2001	Edward I. Ginns	015280-248120US	8624

TITLE OF INVENTION: SUSCEPTABILITY AND RESISTANCE GENES FOR BIPOLAR AFFECTIVE DISORDER

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1338 \$ 1400	\$300	\$ 1700	12/27/2004
EXAMINER		ART UNIT	CLASS-SUBCLASS		
GOLDBERG, JEANINE ANNE		1634	435-006000		

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

☒ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

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2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,

(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1. Venable LLP

2. Ann S. Hobbs, Ph.D.

3. Nancy Axelrod, Ph.D.

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

University of Miami

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Miami, Florida

The Government of the U.S. of America

as represented by the Secretary of Health and Human Services, Rockville, Maryland

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☒ Government

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☒ Issue Fee☒ Publication Fee (No small entity discount permitted)☐ Advance Order - # of Copies

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☐ A check in the amount of the fee(s) is enclosed.☐ Payment by credit card. Form PTO-2038 is attached.☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 22-0261 (enclose an extra copy of this form).

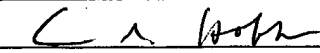
5. Change in Entity Status (from status indicated above)

☒ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature



Date

12/27/04

Typed or printed name

Ann S. Hobbs, Ph.D.

Registration No.

36,830

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